

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>E.H.</i>	<i>32</i>	<i>05-02-01</i>
O.I.P.E. CLASSIFIER	<i>E.H.</i>	<i>1035</i>	<i>5/23</i>
FORMALITY REVIEW			<i>6/26/01</i>
RESPONSE FORMALITY REVIEW			

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	N	N	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	N	N	
17	✓	✓	
18	✓	✓	
19	✓	✓	
20	✓	✓	
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27	✓	✓	
28	✓	✓	
29	✓	✓	
30	✓	✓	
31	✓	✓	
32	N	N	
33	✓	✓	
34	✓	✓	
35	✓	✓	
36	✓	✓	
37	✓	✓	
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43	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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